

## **AREA: IT/TECHNICAL**

### **Overview/Current Status**

Developing an Environmental Public Health Tracking network requires integration of electronic data from environmental and public health programs. This will require informing programs of the benefits of integration, adopting data standards to increase the quality of data collected, and enhancing datasets

#### **Current Conditions/Accomplishments:**

- IT infrastructure assessment completed
- IT integration plan designed
- Development of National Electronic Data Surveillance System (NEDSS) in Montana integrating infectious disease information
- Contract with NRIS: geocoding birth records, designed health data web page, created maps for tumor registry and others

#### **Challenges and Gaps:**

- No incentives and some disincentives to share or integrate data
- Fear of HIPPA
- No or conflicting data collection standards
- Residual paper reporting, little QA/QC at data entry
- No standardized outputs

#### **Goals:**

- Public access to health and environmental data
- Support data sharing and integration
- Develop staged integration plan
- Integrate Chronic Disease/Birth Defect data with NEDSS
- Analyze Health data able to be analyzed with environmental and exposure data
- Promote understanding of HIPPA use for surveillance purposes
- Adoption of data collection standards by Department
- Update databases use standards and legacy data
- Complete surveillance and validate
- Increases ability to easily map data

- Incorporate universal electronic reporting QA/QC at data entry point
- Identify data gaps
- Develop a plan to address data gaps.

**Long-term benefits:**

- Prevent environmental health catastrophes such as the one in Libby, MT, by monitoring trends in chronic diseases.
- Provide quality information to inform health and environmental policy making.
- Easy access to information on current and past projects across the state so can be used to inform future projects and research.

	Outcomes	Action Steps	Lead	Support	Timeline	Evaluation Indicators
1 <sup>st</sup> & 2 <sup>nd</sup> Year	Website improves public access to health data.	<ul style="list-style-type: none"> <li>▪ Create website with County Health Profile data.</li> <li>▪ Publicize website, receive feedback</li> <li>▪ Add Vital Statistics, other public health data</li> <li>▪ Collaborate with cancer website efforts</li> <li>▪ Provide training on website for state and local level partners.</li> </ul>	EPHT  EPHT workgroup Comp Can EPHT	Working Group  Comp Cancer Vital Stats EPHT	3/05-6/05  3/05-9/05  3/05-9/05	Website up # hits # e-mails from public user feedback programs want to join
1 <sup>st</sup> & 2 <sup>nd</sup> Year	Data standards used by data providers	<ul style="list-style-type: none"> <li>▪ Choose data standards</li> <li>▪ Facilitate adoption of standards by Division/Department</li> <li>▪ Upgrade systems to comply with standards</li> <li>▪ Clean legacy data to comply</li> </ul>	IT workgroup	Workgroups with existing health registry staff/ Geocoding workgroup		
1 <sup>st</sup> & 2 <sup>nd</sup> Year	Data sharing agreements improve potential linkage of data	<ul style="list-style-type: none"> <li>▪ Identify priority data sources for EPHT</li> <li>▪ Establish data sharing parameters for each</li> <li>▪ Provide benefits to data providers (i.e. maps)</li> </ul>	EPHT	IT integration workgroup.		

	Outcomes	Action Steps	Lead	Support	Timeline	Evaluation Indicators
3 <sup>rd</sup> & 4 <sup>th</sup> Year	Relevant data sets have resolution and linkage capacity.	<ul style="list-style-type: none"> <li>▪ Evaluate relevant data sets for linkage capacity</li> <li>▪ Improve data sets to facilitate resolution and linking</li> <li>▪ Bring databases into NEDSS system</li> </ul>	EPHT, NEDSS, and DPHHS staff	IT workgroup		
Year 5 & Beyond	Epidemiologists link health and environmental data.	<ul style="list-style-type: none"> <li>▪ Provide epidemiologists access to relevant data contained in NEDSS</li> <li>▪ Analyze environmental &amp; health data to inform prevention and policy questions</li> </ul>				

## AREA: OUTREACH & EDUCATION

### Overview/Current Status

Outreach and education activities are important for raising awareness of environmental health issues and limiting further exposure to harmful contaminants. Building a sustainable EPHT program will require active participation of multiple partners. Information generated will need to be broadly disseminated,

### Current Conditions/Accomplishments:

- Brown bag presentations
- Professional organization presentations
- Grand Round presentations
- County and Tribal EH assessments
- Website
- Newsletter/brochure/posters/fact sheets
- Informational testimony-legislature

**Challenges and Gaps:** Need to expand to outreach new partners, and build capacity to allow others to contribute to and utilize EPHT information

### Goals:

- Provide a central clearinghouse for environmental health information and training.
- Provide education opportunities for the public and health professionals.
- Develop sustainable interest in EPHT by active participation of a broad group of stakeholders.

	Outcomes	Action Steps	Lead	Support	Timeline	Evaluation Indicators
1 <sup>st</sup> & 2 <sup>nd</sup> Year	Expanded local level participation and support for EPHT.	<ul style="list-style-type: none"><li>▪ Follow up with counties/tribes on top priorities to implement their action steps from EH assessments.</li><li>▪ Share local prioritized concerns with other stakeholders.</li><li>▪ Get on agenda of MACO meeting and</li></ul>	EPHT  EPHT  EPHT	County and Tribal Health Departments		

	Outcomes	Action Steps	Lead	Support	Timeline	Evaluation Indicators
		other outreach to other elected officials. <ul style="list-style-type: none"> <li>▪ Build on existing info &amp; develop methods to continue to provide resources, training, and communication to local partners.</li> <li>▪ Continue county/tribal level EH assessments. Provide training and capacity building at new sites.</li> <li>▪ Publish Needs Assessment and Measures Report.</li> </ul>	EPHT  EPHT  EPHT			
1 <sup>st</sup> and 2 <sup>nd</sup> Year	EPHT successfully expanded to include targeted audiences.	<ul style="list-style-type: none"> <li>▪ Develop effective mechanisms to reach identified audiences that include Dept of Agriculture and Tribes/Urban health, EH directors, service units, tribal health, MT/WY tribal leaders</li> <li>▪ Involve insurance, industry, and labor partners</li> <li>▪ Develop plan for American Indian outreach</li> </ul>	EPHT	Advisory Group  UM-Diana Vanek, Mike Vogel, EPA		
1 <sup>st</sup> & 2 <sup>nd</sup> Year	EPHT outreach includes policy makers and agencies (agencies/legislators).	<ul style="list-style-type: none"> <li>▪ Develop educational outreach plan for legislators</li> <li>▪ Meet with key agency administrators</li> <li>▪ Provide Brownbags at other agencies.</li> <li>▪ Meet with IHS.</li> </ul>	EPHT	CEH Interagency Workgroup		
1 <sup>st</sup> & 2 <sup>nd</sup> Year	Training and outreach provided to local partners.	<ul style="list-style-type: none"> <li>▪ Add other partners, include cooperative health centers.</li> <li>▪ Provide training through the PH Institute Training</li> <li>▪ Conduct a major educational campaign</li> </ul>	EPHT			

	Outcomes	Action Steps	Lead	Support	Timeline	Evaluation Indicators
		to raise awareness on fish/mercury. <ul style="list-style-type: none"> <li>▪ Provide environmental assessment training to tribal health and environmental departments</li> <li>▪ Conduct advocacy groups assessment and provide training</li> </ul>				
3 <sup>rd</sup> & 4 <sup>th</sup> Year	EPHT promotes <u>active</u> information exchange among public and environmental health professionals and the public.	<ul style="list-style-type: none"> <li>▪ Provide information on mercury and other contaminants that impact health.</li> <li>▪ Develop outreach and education tools identified in Years 1 &amp; 2.</li> <li>▪ Conduct follow up survey.</li> <li>▪ Continue speaking at conferences</li> <li>▪ Sponsor multiple interagency workgroups.</li> <li>▪ Conduct Grand Rounds presentations at hospitals across the state.</li> </ul>	EPHT	Advocacy partners and interagency workgroups  Dr. Headapohl		
3 <sup>rd</sup> & 4 <sup>th</sup> Year	All educational information is available in multiple formats for a variety of audiences.	<ul style="list-style-type: none"> <li>▪ Develop on-line training modules</li> <li>▪ Conduct Teleconferences.</li> <li>▪ Publish information in partners' newsletters to reach low-income populations and health care providers (Medicaid, WIC, CHIP).</li> </ul>	EPHT			
Year 5 & Beyond	EPHT is recognized as <u>the</u> primary source of environmental health information for Montana.	<ul style="list-style-type: none"> <li>▪ Publish results of interpretation, such as pilot studies in national journal and local newspapers.</li> <li>▪ Make results/interpretations understandable to the general public.</li> <li>▪ Continue newsletter website and other outreach activities.</li> </ul>	EPHT			

## AREA: ADVOCACY/ENVIRONMENTAL JUSTICE (EJ)

### Overview/Current Status

While there is much overlap with the above outreach and education, this category focuses on identifying and serving populations that bear a greater burden of environmental exposures.

### Current Conditions/Accomplishments:

- Participation of advocacy groups on EPHT Advisory Group
- Tribal Health Department finding for EH assessments<sup>[SA1]</sup>
- Development of WIC/Medicaid/CHIP health education materials

**Challenges and Gaps:** An assessment should be completed to clearly identify all subpopulations at greater risk.

### Goals:

- EPHT will assess environmental justice issues in Montana.
- EPHT will provide targeted outreach to American Indians and other populations identified in the environmental justice assessment.
- Pilot projects will be developed to further investigate EJ issues of concern.

	Outcomes	Action Steps	Lead	Support	Timeline	Evaluation Indicators
1 <sup>st</sup> & 2 <sup>nd</sup> Year	EPHT includes all groups in outreach and education activities with particular focus of groups at increased risk of exposure to environmental hazards.	<ul style="list-style-type: none"> <li>▪ Conduct an assessment of EJ issues in MT</li> <li>▪ Facilitate participation of Tribal council and tribal health directors at state level.</li> <li>▪ Conduct visits, presentations to tribal councils, tribal health departments.</li> <li>▪ Connect to AARP/MT senior citizens groups, low-income organizations.</li> <li>▪ Generate support for advocacy; support WVE and other NGOs.</li> </ul>	EPHT	Advisory Group		
3 <sup>rd</sup> & 4 <sup>th</sup>	EPHT targets	<ul style="list-style-type: none"> <li>▪ Use maps to characterize EJ issues.</li> </ul>				

	Outcomes	Action Steps	Lead	Support	Timeline	Evaluation Indicators
Year	environmental justice issues	<ul style="list-style-type: none"> <li>Prioritize EPHT activities based on the EJ assessment</li> </ul>				
Year 5 & Beyond	Results of EJ assessment drives priorities of tracking initiatives	<ul style="list-style-type: none"> <li>Develop interventions that are realistic, participatory, self-determined and self-driven.</li> </ul>				



## **AREA: POLICY & LEGISLATION**

### **Overview/Current Status**

One of the goals of Environmental Public Health Tracking is to inform policy and legislation in order to improve the health of Montanans.

#### **Current Conditions/Accomplishments:**

- Model state Public Health law updates drafted
- Plan initiated to develop model EPHT legislation

#### **Challenges and Gaps:**

- Montana law is not clear on the roles or limitations of Public Health
- Model EPHT legislation does not exist
- DPHHS does not have access to hospital discharge data

#### **Goals:**

- Pass model Public Health legislation
- Pass model EPHT legislation
- Obtain CDC Part B funding
- Move toward EPHT financial stability
- Ensure Network sustainability
- Use results of EPHT analyses to shape public policy
- Ensure that DPHHS has access to identified hospital discharge data
- Put in place public health code in Indian country

	Outcomes	Action Steps	Lead	Support	Timeline	Evaluation Indicators
1 <sup>st</sup> & 2 <sup>nd</sup> Year	State Legislation: Model EPHT legislation introduced in 2007 legislative session	<ul style="list-style-type: none"> <li>Develop model EPHT legislation developed</li> <li>Solicit comments from policy makers: county commissioners, tribal, etc.</li> <li>Create EPHT sub-committee focusing on policy and legislation.</li> <li>Identify and involve all stakeholders in the policy process.</li> <li>Establish coherent prioritization for legislative action.</li> <li>Implement the outreach and education plan for all counties and their legislators.</li> <li>Establish stakeholder commitment to support of legislative agenda (model PH &amp; EPHT legislation).</li> <li>Introduce model EPHT Legislation in 2007 Legislative session.</li> </ul>	Contractor EPHT  EPHT Committee  Committee  Committee  DPHHS	EPHT  Advisory Group  Stakeholders  Stakeholders	8/07  10/31/06  10/31/06	
1 <sup>st</sup> & 2 <sup>nd</sup> Year	Data management policy covering all State agencies is in place.	<ul style="list-style-type: none"> <li>Explore the difference (including cost analysis) between developing registries vs. other types of surveillance.</li> <li>Research other state models.</li> <li>Identify data management policy (DMP) model that will meet MT's needs. Include citation of statutory authority, data sharing, use of data, protection of privacy</li> </ul>	EPHT  EPHT		10/31/06  1/1/06  3/1/06	
1 <sup>st</sup> & 2 <sup>nd</sup> Year	DPHHS has access to identified hospital discharge data	<ul style="list-style-type: none"> <li>Communicate with Montana Hospital Association</li> <li>Build support among hospitals/ physicians</li> <li>Develop legislation</li> </ul>				
3 <sup>rd</sup> & 4 <sup>th</sup> Year	Model EPHT legislation re-introduced (if not	<ul style="list-style-type: none"> <li>Increase Support</li> <li>Re-introduce model legislation</li> </ul>			8/07	

	Outcomes	Action Steps	Lead	Support	Timeline	Evaluation Indicators
	passed in 2007 session).					
3 <sup>rd</sup> & 4 <sup>th</sup> Year	Data Management Policy (DMP) evaluated and updated.	<ul style="list-style-type: none"> <li>▪ Evaluate DMP</li> <li>▪ Uptdate DMP based on evaluation results</li> </ul>				
Year 5 & Beyond	Promote policy changes appropriate to EPHT findings					

## **AREA: PARTNERSHIPS/COLLABORATIVE ACTIVITIES**

### **Overview/Current Status**

Collaborative efforts are incredibly powerful. Increasing communication between people in health and environmental capacities allows us to learn from each other and share our strengths. Together we can accomplish much more than we can alone.

### **Current Conditions/Accomplishments:**

- Interagency Children's Environmental Health Group
- Fish and Contaminants workgroup
- Asthma and Air Quality Pilot Project (UM)
- Statewide Surveys (MSU)
- DEQ/EPA/ATSDR collaborative efforts (Lewistown)
- Western states EPHT collaboration
- Biomonitoring and EPHT collaboration

### **Challenges and Gaps:**

- Do not know what all groups are working on across the state
- Workgroups are state employee/Helena –centric
- EPHT has limited staff to attend multiple, ongoing workgroups

### **Goals:**

- Add pilot studies with new partners
- Increase number and breadth of collaborative efforts
- Continue to learn about past and ongoing efforts across the state
- Collaborate beyond state/national borders
- Use multimedia meeting venues

	Outcomes	Action Steps	Lead	Support	Timeline	Evaluation Indicators
1 <sup>st</sup> & 2 <sup>nd</sup> Year	Pilot studies expanded with new partners	<ul style="list-style-type: none"> <li>Publicize EPHT priority environmental and health factors</li> <li>Distribute Request for Proposals – target new partners</li> <li>Explore collaborative sources of funding</li> </ul>				
1 <sup>st</sup> & 2 <sup>nd</sup> Year	Existing interagency workgroups continued					
1 <sup>st</sup> & 2 <sup>nd</sup> Year	Number and breadth of interagency workgroups increased as interest develops	<ul style="list-style-type: none"> <li>Assist with Biomonitoring projects</li> <li>Communicate with CDC, ATSDR, AOEC, DEQ, EPA, MBMG, USGS, USDA, MHA, physician groups, Comprehensive Cancer, &amp; universities on current studies and ways to collaborate</li> </ul>	Biomonitoring	EPHT		
1 <sup>st</sup> & 2 <sup>nd</sup> Year	Interstate EPHT collaboration included	<ul style="list-style-type: none"> <li>Become involved with regional collaborations</li> </ul>				
3 <sup>rd</sup> & 4 <sup>th</sup> Year	Pilots evaluated and expanded	<ul style="list-style-type: none"> <li>Evaluate pilots</li> <li>Expand pilots based on analysis</li> </ul>				
5 <sup>th</sup> Year	Pilots evaluated and expanded statewide					